

Application No. (if known): 10/643,003

Attorney Docket No.: 02291/100H204-US1

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. \_\_\_\_\_ in an envelope addressed to:

**EV 382052892US**

MS Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on December 3, 2004  
Date

*A. Stantini*

Signature

*A. Stantini*

Typed or printed name of person signing Certificate

Registration Number, if applicable

Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal

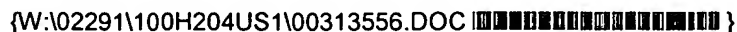
Amendment

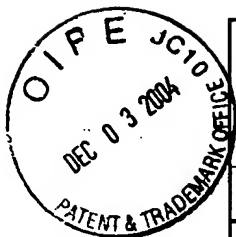
Amendment Transmittal (1 page)

Terminal Disclaimer by Applicant Attorney

Check in the amount of \$110.00 **#6915**

12/10/81





Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (11-04)  
Approved for use through 7/31/2006. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)  
110.00

## Complete if Known

Application Number	10/643,003
Filing Date	August 18, 2003
First Named Inventor	Zhongming Zeng
Examiner Name	E. Peselev
Art Unit	1623
Attorney Docket No.	02291/100H204-US1

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order

☐ Deposit Account ☐ None

Deposit  
Account  
Number

04-0100

Deposit  
Account  
Name

Darby & Darby P.C.

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below

☐ Charge fee(s) indicated below, except for the filing fee

☐ Charge any additional fee(s) or any underpayment of fee(s)  
under 37 CFR 1.16 and 1.17

☒ Credit any overpayments

To the above-identified deposit account.

☐ Other (please identify):

## FEE CALCULATION

### 1. BASIC FILING FEE

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid (\$)
Utility Filing Fee	790	395	
Design Filing Fee	350	175	
Plant Filing Fee	550	275	
Reissue Filing Fee	790	395	
Provisional Filing Fee	160	80	
<b>Subtotal (1)</b>	<b>\$</b>	<b>0.00</b>	

## FEE CALCULATION (continued)

### 2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claim over 3	88	44
Multiple dependent claims	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

- 20 or HP =      x      =  
HP= highest number of total claims paid for, if greater than 20

Indep. Claims      Extra Claims      Fee (\$)      Fee Paid (\$)

- 3 or HP =      x      =

HP= highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims      Fee (\$)      Fee Paid (\$)

**Subtotal (2)** \$ 0.00

### 3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. Fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of appeal	340	170	
Request for oral hearing	300	150	
Other: 1814 Statutory Disclaimer			110.00
<b>Subtotal (3)</b>	<b>\$</b>	<b>110.00</b>	

## SUBMITTED BY

Signature	<i>Howard M. Frankfort</i>	Registration No. (Attorney/Agent)	32,613	Telephone	(212) 527-7736
Name (Print/Type)	Howard M. Frankfort, Ph.D.	Date	December 3, 2004		

Express Mail Label No.

Dated: \_\_\_\_\_